

# Work Order ID 61584

Monday, August 30, 2010 12:45:31 PM

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Item ID: D350-727-045

Accept

Revision ID:

Item Name: Wearplate, Full Length, LH/RH

Start Date: 8/30/2010 Start Qty: 2.00

Required Date: 9/6/2010 Req'd Qty: 2.00

Reference:

Approvals:

Process Plan:

Date: 10-8-30

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run

Start

Stop

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty.

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

IIN D350-727

Rev A

100

0.00



DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile and create labels per PPP D350-727-045 CHG001

110

0.00



Pick Kit

Packaging

Memo

0.00

Packaging

120

0.00



QC4- 100% Inspect kits for completeness

QC

Memo

0.00

Quality Control

Hj for BG 10-9-01

10/9/10 20

2 1005-02

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 61584**

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Item ID: D350-727-045

Accept



Setup Start



Revision ID:

Stop



Item Name: Wearplate, Full Length, LH/RH

Start Date: 8/30/2010 Start Qty: 2.00



Cust Item ID:

Required Date: 9/6/2010 Req'd Qty: 2.00

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
	Packaging								
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D350-727-045 □ Location: <u>62</u> □ PPP Rev: <u>B</u>								
140	QC21- Final Inspection - Work Order Release	0.00							
QC	Memo	0.00							
Quality Control									

Comp/2 (2)

10/09/02

MF  
10-9-02

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

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Work Order ID: 61584

Parent Item: D350-727-045

Parent Item Name: Wearplate, Full Length, LH/RH

Start Date: 8/30/2010



Required Date: 9/6/2010

Start Qty: 2.00

Required Qty: 2.00



Comments: IPP Rev:A ☐ 05.05.12 ☐ New issue ☐ KJ/JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D3319-1		Manufactured	No			120	Each	8.0000	1	2			
													
Wearplate													

Location	Loc Qty	Loc Code
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ST497	8	
57710	8	

D3319-3		Manufactured	No			120	Each	6.0000	1	2			
													
Wearplate													

Location	Loc Qty	Loc Code
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ST497	6	
60305	6	

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries